

Image# 202604019856925180

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) ARNESS, MARK, , ,		2. Candidate's FEC Identification Number H4MD05144
(b) Address (number and street) <input type="checkbox"/> Check if address changed 2874 IVORY LANE		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code PORT REPUBLIC MD 20676		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate MD 05

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) COMMITTEE TO ELECT MARK ARNESS	
(b) Address (number and street) PO BOX 158	
(c) City, State, and ZIP Code PRINCE FREDERICK MD 20678	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)	
(b) Address (number and street)	
(c) City, State, and ZIP Code	

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate <i>Arness, Mark, , ,</i>	Date 04/01/2026
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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